

Fill in this information to identify your case and this filing:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number	<u>22-08206</u>		

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.  
 Yes. Where is the property?

1.1

#### 12674 Preacher Powell Rd.

Street address, if available, or other description

**Carriere**      **MS**      **39426-0000**

City                  State                  ZIP Code

#### Pearl River

County

##### What is the property? Check all that apply

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?      Current value of the portion you own?**  
**\$125,000.00      \$125,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property  
(see instructions)

##### Who has an interest in the property? Check one

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$125,000.00**

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- No  
 Yes

3.1 Make: Nissan  
 Model: Rogue  
 Year: 2015  
 Approximate mileage: \_\_\_\_\_  
 Other information: \_\_\_\_\_

**Who has an interest in the property? Check one**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
  
 **Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

**Current value of the portion you own?**

\$7,000.00

\$7,000.00

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=> \$7,000.00

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe.....

Furniture \$500.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No  
 Yes. Describe.....

Electronics \$1,500.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No  
 Yes. Describe.....

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe.....

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- No

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Yes. Describe.....

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

**Clothing**

**\$500.00**

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

**\$2,500.00**

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

**Gaiamed Dental, Inc.**

**100 %**

**\$0.00**

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

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Yes. Give specific information about them  
Issuer name:

**21. Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account: Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes. ....

Institution name or individual:

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them....

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them....

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them....

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

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Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No  
 Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- No  
 Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- No  
 Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- No  
 Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$0.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- No. Go to Part 6.  
 Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.  
 Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

- No  
 Yes. Give specific information.....

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....**

**\$0.00**

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**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....		\$125,000.00
56. Part 2: Total vehicles, line 5	\$7,000.00	
57. Part 3: Total personal and household items, line 15	\$2,500.00	
58. Part 4: Total financial assets, line 36	\$0.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
	+	
62. Total personal property. Add lines 56 through 61...	\$9,500.00	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$134,500.00

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS	
Case number (if known)	<u>22-08206</u>		

 Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
<b>2015 Nissan Rogue</b> Line from <i>Schedule A/B</i> : 3.1	<u>\$7,000.00</u>	<input checked="" type="checkbox"/> <u>\$2,400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(c)</b>
<b>2015 Nissan Rogue</b> Line from <i>Schedule A/B</i> : 3.1	<u>\$7,000.00</u>	<input checked="" type="checkbox"/> <u>\$14.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Furniture</b> Line from <i>Schedule A/B</i> : 6.1	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Electronics</b> Line from <i>Schedule A/B</i> : 7.1	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$1,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Clothing</b> Line from <i>Schedule A/B</i> : 11.1	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(a)</b>

Debtor 1 Andromeda T. Pearson

Case number (if known)

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3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)	<u>22-08206</u>		

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Amur	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Creditor's Name  <b>304 W. 3rd St. Grand Island, NE 68801</b>  Number, Street, City, State & Zip Code	<b>Business loan for equipment owned by Gaiamed Dentistry, Inc.</b>	<b>\$50,000.00</b>	<b>\$0.00</b>	<b>\$50,000.00</b>

**304 W. 3rd St.  
Grand Island, NE 68801**  
  
Number, Street, City, State & Zip Code

**Who owes the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

2.2	Centra Leasing	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Creditor's Name  <b>1400 Preston Rd., # 115 Plano, TX 75093</b>  Number, Street, City, State & Zip Code	<b>Business loan for equipment owned by Gaiamed Dentistry, Inc.</b>	<b>\$30,000.00</b>	<b>Unknown</b>	<b>Unknown</b>

**1400 Preston Rd., # 115  
Plano, TX 75093**  
  
Number, Street, City, State & Zip Code

**Who owes the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Debtor 1 **Andromeda T. Pearson**  
 First Name Middle Name Last Name

Case number (if known)

**22-08206**

2.3	<b>Kinecta Federal Credit Union</b> <small>Creditor's Name</small> <b>Attn: Bankruptcy Dept P.O. Box 10003 Manhattan Beach, CA 90266</b> <small>Number, Street, City, State &amp; Zip Code</small>	<b>Describe the property that secures the claim:</b> <b>2015 Nissan Rogue</b>	<b>\$4,586.00</b>	<b>\$7,000.00</b>	<b>\$0.00</b>
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**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt**

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

**Opened  
10/17 Last  
Active 07/22**

**Last 4 digits of account number** **0001**

2.4 **Rushmore Loan Management Svcs.**

Creditor's Name

**PO Box 514707  
Los Angeles, CA 90051**

Number, Street, City, State & Zip Code

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt**

**Describe the property that secures the claim:**

**12674 Preacher Powell Rd. Carriere,  
MS 39426 Pearl River County**

**\$220,101.85**

**\$125,000.00**

**\$95,101.85**

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

**Date debt was incurred** \_\_\_\_\_

**Last 4 digits of account number** \_\_\_\_\_

Debtor 1 **Andromeda T. Pearson**

First Name

Middle Name

Last Name

Case number (if known)

**22-08206**

**2.5 TIAA**

Creditor's Name

**301 W. Bay St.  
Jacksonville, FL 32202**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**\$80,894.00**

**Unknown**

**Unknown**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**2.6 TIAA**

Creditor's Name

**301 W. Bay St.  
Jacksonville, FL 32202**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**\$152,392.00**

**Unknown**

**Unknown**

**Business loan for equipment owned by Gaiamed Dentistry, Inc.**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \_\_\_\_\_

**\$537,973.85**

If this is the last page of your form, add the dollar value totals from all pages.

**\$537,973.85**

Write that number here: \_\_\_\_\_

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[ ] Name, Number, Street, City, State & Zip Code  
**Marinosci Law Group**  
**415 North McKinley**  
**Suite 360**  
**Little Rock, AR 72205**

On which line in Part 1 did you enter the creditor? **2.4**

Last 4 digits of account number \_\_\_\_\_

[ ] Name, Number, Street, City, State & Zip Code  
**Weltman, Weinberg & Reis Co., LPA**  
**965 Keynote Circle**  
**Brooklyn Heights, OH 44131**

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
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United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)	<u>22-08206</u>		

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	Last 4 digits of account number	<u>Unknown</u>	<u>Unknown</u>
<b>IL Dept of Revenue</b> Priority Creditor's Name <b>Bankruptcy Section</b> <b>PO Box 19035</b> <b>Springfield, IL 62794</b> Number Street City State Zip Code	When was the debt incurred?		
<b>Who incurred the debt?</b> Check one.	As of the date you file, the claim is: Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b>	<b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Andromeda T. Pearson**

2.2	<b>Internal Revenue Service</b> Priority Creditor's Name <b>PO Box 7346</b> <b>Philadelphia, PA 19101</b> Number Street City State Zip Code	Last 4 digits of account number	<b>Unknown</b>	<b>Unknown</b>	<b>Unknown</b>
	<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b>			
	<input checked="" type="checkbox"/> Debtor 1 only				
	<input type="checkbox"/> Debtor 2 only				
	<input type="checkbox"/> Debtor 1 and Debtor 2 only				
	<input type="checkbox"/> At least one of the debtors and another				
	<input type="checkbox"/> <b>Check if this claim is for a community debt</b>				
	<b>Is the claim subject to offset?</b>				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
		<b>As of the date you file, the claim is:</b> Check all that apply			
		<input type="checkbox"/> Contingent			
		<input type="checkbox"/> Unliquidated			
		<input type="checkbox"/> Disputed			
		<b>Type of PRIORITY unsecured claim:</b>			
		<input type="checkbox"/> Domestic support obligations			
		<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
		<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
		<input type="checkbox"/> Other. Specify _____			

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1		<b>Total claim</b>
	<b>Amex</b> Nonpriority Creditor's Name <b>Correspondence/Bankruptcy</b> <b>Po Box 981540</b> <b>EI Paso, TX 79998</b> Number Street City State Zip Code	Last 4 digits of account number <b>1543</b> <span style="float: right;"><b>\$204.00</b></span>
	<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 07/18 Last Active 6/23/22</b>
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed
	<input type="checkbox"/> At least one of the debtors and another	<b>Type of NONPRIORITY unsecured claim:</b>
	<input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Student loans
	<b>Is the claim subject to offset?</b>	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>

Debtor 1 **Andromeda T. Pearson**

4.2	<b>Amex/Bankruptcy</b> Nonpriority Creditor's Name <b>Correspondence/Bankruptcy</b> <b>Po Box 981540</b> <b>EI Paso, TX 79998</b> Number Street City State Zip Code	Last 4 digits of account number <b>6466</b>	\$238.00
		When was the debt incurred? <b>Opened 12/17 Last Active 6/18/22</b>	
	<b>As of the date you file, the claim is:</b> Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <b>Credit Card</b> <input type="checkbox"/> Yes		
4.3	<b>Apple Financial Services</b> Nonpriority Creditor's Name <b>PO Box 41602</b> <b>Philadelphia, PA 19101-1602</b> Number Street City State Zip Code	Last 4 digits of account number	\$1,228.94
		When was the debt incurred?	
	<b>As of the date you file, the claim is:</b> Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
4.4	<b>Aspire Credit Card</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 105555</b> <b>Atlanta, GA 30348</b> Number Street City State Zip Code	Last 4 digits of account number <b>3272</b>	\$1,431.00
		When was the debt incurred? <b>Opened 09/21 Last Active 7/02/22</b>	
	<b>As of the date you file, the claim is:</b> Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <b>Credit Card</b> <input type="checkbox"/> Yes		

Debtor 1 Andromeda T. Pearson

Case number (if known)

22-08206

4.5

Barclays Bank/athleta

Nonpriority Creditor's Name

P.o. Box 8803  
Wilmington, DE 19899

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

5178\$5,129.00Opened 07/17 Last Active  
07/22

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

4.6

Capital Bank N.A.

Nonpriority Creditor's Name

2275 Research Blvd. Ste 600  
Rockville, MD 20850

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

5126\$68.00Opened 06/16 Last Active  
07/22

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

4.7

Capitalone

Nonpriority Creditor's Name

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

1341\$3,918.00Opened 08/18 Last Active  
06/22

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account

Debtor 1 **Andromeda T. Pearson**

Case number (if known)

**22-08206**

4.8	<b>Chase Card Services</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. 15298</b> <b>Wilmington, DE 19850</b> Number Street City State Zip Code	Last 4 digits of account number <b>2992</b>	\$2,561.00
	<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 10/16 Last Active 6/21/22</b>	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.9	<b>Chase Card Services</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. 15298</b> <b>Wilmington, DE 19850</b> Number Street City State Zip Code	Last 4 digits of account number <b>7667</b>	\$1,990.00
	<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 07/18 Last Active 07/22</b>	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	
4.1 0	<b>Citibank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 790034</b> <b>St Louis, MO 63179</b> Number Street City State Zip Code	Last 4 digits of account number <b>9819</b>	\$2,281.00
	<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 01/18 Last Active 6/21/22</b>	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 Andromeda T. Pearson4.1  
1**Citibank North America**

Nonpriority Creditor's Name

**Citibank SD MC 425  
5800 South Corp Place  
Sioux Falls, SD 57108**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Other. Specify **Credit Card**  
 Yes

Last 4 digits of account number

**9018****\$3,938.00****Opened 08/18 Last Active  
07/22**

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

Type of NONPRIORITY unsecured claim:

- Other. Specify **Credit Card**

4.1  
2**Citibank/The Home Depot**

Nonpriority Creditor's Name

**Citicorp Credit Svcs/Centralized Bk dept  
Po Box 790034  
St Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Other. Specify **Charge Account**  
 Yes

Last 4 digits of account number

**0783****\$279.00****Opened 09/18 Last Active  
6/24/22**

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

Type of NONPRIORITY unsecured claim:

4.1  
3**Comenity Capital/JJIIIS**

Nonpriority Creditor's Name

**Attn: Bankruptcy  
Po Box 182125  
Columbus, OH 43218**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Other. Specify **Charge Account**  
 Yes

Last 4 digits of account number

**3735****\$287.00****Opened 05/22 Last Active  
6/11/22**

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

Debtor 1 Andromeda T. Pearson4.1  
4**Credit One Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Department**  
**Po Box 98873**  
**Las Vegas, NV 89193**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No       Contingent  
 Yes       Unliquidated

Last 4 digits of account number

4298\$1,630.00**Opened 11/16 Last Active**7/11/22

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

4.1  
5**Credit One Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Department**  
**Po Box 98873**  
**Las Vegas, NV 89193**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No       Contingent  
 Yes       Unliquidated

Last 4 digits of account number

4770\$982.00**Opened 10/18 Last Active**7/14/22

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

4.1  
6**Cws/cw Nexus**

Nonpriority Creditor's Name

**Attn: Card Services**  
**Po Box 9201**  
**Old Bethpage, NY 11804**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No       Contingent  
 Yes       Unliquidated

Last 4 digits of account number

3421\$982.00**Opened 9/16/21 Last Active**7/11/22

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

Debtor 1 Andromeda T. Pearson4.1  
7**Dale Tarantur**

Nonpriority Creditor's Name

**60 Revere, #600****Northbrook, IL 60062**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**\$10,000.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.1  
8**Discover Bank**

Nonpriority Creditor's Name

**c/o Discover Products Inc.****PO Box 3025****New Albany, OH 43054**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4465****\$7,669.05****Opened 08/18 Last Active****7/08/22**

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.1  
9**Dsnb Bloomingdales**

Nonpriority Creditor's Name

**Attn: Recovery "Bk"****Po Box 9111****Mason, OH 45040**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**2846****\$1,856.00****Opened 04/17 Last Active****7/10/22**

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Charge Account** \_\_\_\_\_

Debtor 1 Andromeda T. Pearson

Case number (if known)

22-082064.2  
0**First Premier Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 5524****Sioux Falls, SD 57117**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Contingent  
 Yes       Unliquidated

Last 4 digits of account number

4689\$1,099.00**Opened 06/17 Last Active 07/22**

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

4.2  
1**First Premier Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 5524****Sioux Falls, SD 57117**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Contingent  
 Yes       Unliquidated

Last 4 digits of account number

8748\$821.00**Opened 01/20 Last Active 07/22**

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

4.2  
2**Fundomate**

Nonpriority Creditor's Name

**300 Continental Blvd.  
El Segundo, CA 90245**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Contingent  
 Yes       Unliquidated

Last 4 digits of account number

\$6,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

Debtor 1 Andromeda T. Pearson4.2  
3**Genesis FS Card**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 4477****Beaverton, OR 97076**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Debts to pension or profit-sharing plans, and other similar debts  
 Yes       Other. Specify Credit Card

Last 4 digits of account number

4478\$191.00**Opened 03/22 Last Active**7/15/22

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card4.2  
4**Synccb/ebay**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 965060****Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Debts to pension or profit-sharing plans, and other similar debts  
 Yes       Other. Specify Credit Card

Last 4 digits of account number

4549\$4,061.00**Opened 12/18 Last Active**7/08/22

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card4.2  
5**Synchrony Bank**

Nonpriority Creditor's Name

**c/o PRA Receivables Management****PO Box 41021****Norfolk, VA 23541**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No       Debts to pension or profit-sharing plans, and other similar debts  
 Yes       Other. Specify Gap

Last 4 digits of account number

3238\$3,475.00**Opened 06/17 Last Active**07/22

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Gap

Debtor 1 Andromeda T. Pearson

Case number (if known)

22-082064.2  
6**Synchrony Bank/Care Credit**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**  
**Po Box 965064**  
**Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

7933\$191.00**Opened 09/21 Last Active 7/01/22**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Charge Account

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		<b>Total Claim</b>
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <b>0.00</b>
	6b. Taxes and certain other debts you owe the government	6b. \$ <b>0.00</b>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <b>0.00</b>
6e. Total Priority. Add lines 6a through 6d.	6e. \$ <b>0.00</b>	
Total claims from Part 2	6f. Student loans	6f. \$ <b>0.00</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <b>0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <b>0.00</b>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <b>62,509.99</b>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <b>62,509.99</b>

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS</u>			
Case number (if known)	<u>22-08206</u>		

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			State what the contract or lease is for
2.1			
Name			
Number	Street		
City	State	ZIP Code	
2.2			
Name			
Number	Street		
City	State	ZIP Code	
2.3			
Name			
Number	Street		
City	State	ZIP Code	
2.4			
Name			
Number	Street		
City	State	ZIP Code	
2.5			
Name			
Number	Street		
City	State	ZIP Code	

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	<u>22-08206</u>		

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1 **Gaiamed Dental, Inc.**  
1535 Lake Cook Rd.  
Suite 108  
Northbrook, IL 60062

- Schedule D, line 2.5  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
TIAA

3.2 **Gaiamed Dental, Inc.**  
1535 Lake Cook Rd.  
Suite 108  
Northbrook, IL 60062

- Schedule D, line 2.6  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
TIAA

3.3 **Gaiamed Dental, Inc.**  
1535 Lake Cook Rd.  
Suite 108  
Northbrook, IL 60062

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.3  
 Schedule G \_\_\_\_\_  
Apple Financial Services

Debtor 1 **Andromeda T. Pearson**

Case number (if known) **22-08206**

**Additional Page to List More Codebtors**

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

3.4 **Gaiamed Dental, Inc.**  
**1535 Lake Cook Rd.**  
**Suite 108**  
**Northbrook, IL 60062**

Schedule D, line **2.1**  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
**Amur**

3.5 **Gaiamed Dental, Inc.**  
**1535 Lake Cook Rd.**  
**Suite 108**  
**Northbrook, IL 60062**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
**Ascension Capital**

3.6 **Gaiamed Dental, Inc.**  
**1535 Lake Cook Rd.**  
**Suite 108**  
**Northbrook, IL 60062**

Schedule D, line **2.2**  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
**Centra Leasing**

3.7 **Gaiamed Dental, Inc.**  
**1535 Lake Cook Rd.**  
**Suite 108**  
**Northbrook, IL 60062**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.22**  
 Schedule G \_\_\_\_\_  
**Fundomate**

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<b>NORTHERN DISTRICT OF ILLINOIS</b>
Case number (if known)	<b>22-08206</b>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:  
MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

	Debtor 1	Debtor 2 or non-filing spouse
<input checked="" type="checkbox"/> Employed	<input type="checkbox"/> Employed	
<input type="checkbox"/> Not employed	<input type="checkbox"/> Not employed	
Occupation	<b>Dentist</b>	
Employer's name	<b>Gaiamed Dentistry, Inc.</b>	
Employer's address		

How long employed there?

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <b>0.00</b>	\$ <b>N/A</b>
3. Estimate and list monthly overtime pay.	3. +\$ <b>0.00</b>	+\$ <b>N/A</b>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <b>0.00</b>	\$ <b>N/A</b>

Debtor 1 Andromeda T. Pearson

Case number (if known) 22-08206

Copy line 4 here .....	For Debtor 1	For Debtor 2 or non-filing spouse
5. List all payroll deductions:	4. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5b. Mandatory contributions for retirement plans	5b. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5c. Voluntary contributions for retirement plans	5c. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5d. Required repayments of retirement fund loans	5d. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5e. Insurance	5e. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5f. Domestic support obligations	5f. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5g. Union dues	5g. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
5h. Other deductions. Specify: _____	5h.+ \$ <u><b>0.00</b></u>	+ \$ <u><b>N/A</b></u>
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u><b>7,500.00</b></u>	\$ <u><b>N/A</b></u>
8b. Interest and dividends	8b. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8d. Unemployment compensation	8d. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8e. Social Security	8e. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8g. Pension or retirement income	8g. \$ <u><b>0.00</b></u>	\$ <u><b>N/A</b></u>
8h. Other monthly income. Specify: _____	8h.+ \$ <u><b>0.00</b></u>	+ \$ <u><b>N/A</b></u>
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u><b>7,500.00</b></u>	\$ <u><b>N/A</b></u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u><b>7,500.00</b></u>	+ \$ <u><b>N/A</b></u> = \$ <u><b>7,500.00</b></u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u><b>0.00</b></u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ <u><b>7,500.00</b></u>	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<b>NORTHERN DISTRICT OF ILLINOIS</b>
Case number (If known)	<b>22-08206</b>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.

Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?  No

Do not list Debtor 1 and  
Debtor 2.

Yes. Fill out this information for  
each dependent.....

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent  
live with you?

Do not state the  
dependents names.

**Daughter**

**18**

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

3. Do your expenses include  
expenses of people other than  
yourself and your dependents?  No  
 Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know  
the value of such assistance and have included it on Schedule I: Your Income  
(Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage  
payments and any rent for the ground or lot.

4. \$ **1,500.00**

If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

4a. \$	<b>0.00</b>
4b. \$	<b>0.00</b>
4c. \$	<b>0.00</b>
4d. \$	<b>0.00</b>
5. \$	<b>0.00</b>

5. Additional mortgage payments for your residence, such as home equity loans

Debtor 1 Andromeda T. Pearson

Case number (if known) 22-08206

6. <b>Utilities:</b>	6a. Electricity, heat, natural gas	6a. \$ <u>725.00</u>
	6b. Water, sewer, garbage collection	6b. \$ <u>30.00</u>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>0.00</u>
	6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. <b>Food and housekeeping supplies</b>	7. \$ <u>400.00</u>	
8. <b>Childcare and children's education costs</b>	8. \$ <u>0.00</u>	
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>100.00</u>	
10. <b>Personal care products and services</b>	10. \$ <u>150.00</u>	
11. <b>Medical and dental expenses</b>	11. \$ <u>100.00</u>	
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>700.00</u>	
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>40.00</u>	
14. <b>Charitable contributions and religious donations</b>	14. \$ <u>0.00</u>	
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ <u>0.00</u>	
15b. Health insurance	15b. \$ <u>0.00</u>	
15c. Vehicle insurance	15c. \$ <u>0.00</u>	
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>	
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>	
17. <b>Installment or lease payments:</b>	17a. Car payments for Vehicle 1 \$ <u>494.00</u>	
	17b. Car payments for Vehicle 2 \$ <u>0.00</u>	
	17c. Other. Specify: _____ \$ <u>0.00</u>	
	17d. Other. Specify: _____ \$ <u>0.00</u>	
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>	
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ <u>0.00</u>	
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	20a. Mortgages on other property \$ <u>0.00</u>	
	20b. Real estate taxes \$ <u>0.00</u>	
	20c. Property, homeowner's, or renter's insurance \$ <u>0.00</u>	
	20d. Maintenance, repair, and upkeep expenses \$ <u>0.00</u>	
	20e. Homeowner's association or condominium dues \$ <u>0.00</u>	
21. <b>Other:</b> Specify: _____	21. +\$ <u>0.00</u>	
22. <b>Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$ <u>4,239.00</u>	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>4,239.00</u>	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>4,239.00</u>	
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$ <u>7,500.00</u>	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>4,239.00</u>	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>3,261.00</u>	
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	<b>22-08206</b>		

Check if this is an amended filing

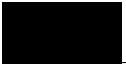
Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Andromeda T. Pearson

Andromeda T. Pearson

Signature of Debtor 1

Date August 4, 2022

X

Signature of Debtor 2

Date \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Andromeda T. Pearson</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	<b>22-08206</b>		

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married  
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1  
lived there

Debtor 2 Prior Address:

Dates Debtor 2  
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

#### Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No  
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Check all that apply.		Sources of income Check all that apply.	
From January 1 of current year until the date you filed for bankruptcy:  <input type="checkbox"/> Wages, commissions, bonuses, tips  <input checked="" type="checkbox"/> Operating a business	\$52,500.00	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input type="checkbox"/> Operating a business	

Debtor 1 **Andromeda T. Pearson**Case number (if known) **22-08206**

	<b>Debtor 1</b> <b>Sources of income</b> Check all that apply.	<b>Gross income</b> (before deductions and exclusions)	<b>Debtor 2</b> <b>Sources of income</b> Check all that apply.	<b>Gross income</b> (before deductions and exclusions)
<b>For last calendar year:</b> <b>(January 1 to December 31, 2021 )</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input checked="" type="checkbox"/> Operating a business	\$90,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input type="checkbox"/> Operating a business	
<b>For the calendar year before that:</b> <b>(January 1 to December 31, 2020 )</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input checked="" type="checkbox"/> Operating a business	\$90,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No
- Yes. Fill in the details.

<b>Debtor 1</b> <b>Sources of income</b> Describe below.	<b>Gross income from each source</b> (before deductions and exclusions)	<b>Debtor 2</b> <b>Sources of income</b> Describe below.	<b>Gross income</b> (before deductions and exclusions)

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

- No. Go to line 7.
- Yes List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.
- Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
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**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Student Loan Marketing vs ANDROMEDA PEARSON	JUDGMENT	COOK COUNTY, ILLINOIS	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>- 106,747.82</b>			

Unknown Plaintiff vs ANDROMEDA PEARSON 99595545	FEDERAL TAX LIEN	COOK COUNTY, ILLINOIS	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>- 118,888.97</b>			

Missouri Guaranteed Student Loan Program vs ANDROMEDA PEARSON	JUDGMENT	COOK COUNTY, ILLINOIS - 1ST MUNICIPAL DI	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>- 21,632.59</b>			

Missouri Guaranteed Student Loan Progrm vs ANDROMEDA PEARSON	JUDGMENT	COOK COUNTY, ILLINOIS - 1ST MUNICIPAL DI	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>- 1,184.08</b>			

Missouri Guaranteed Student Loan Program vs ANDROMEDA PEARSON	JUDGMENT	COOK COUNTY, ILLINOIS - 1ST MUNICIPAL DI	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>- 29,670.40</b>			

Debtor 1 **Andromeda T. Pearson**Case number (if known) **22-08206**

Case title Case number	Nature of the case	Court or agency	Status of the case
<b>State Of Illinois vs TEREAU PEARSON 11312909</b>	<b>STATE TAX LIEN</b>	<b>ILLINOIS</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
			<b>- 35,798.00</b>
<b>Capstone Partners vs TEREAU PEARSON</b>	<b>JUDGMENT</b>	<b>COOK COUNTY, ILLINOIS - 1ST MUNICIPAL DI</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
			<b>- 3,394.25</b>

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

- No. Go to line 11.  
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
Rushmore Loan Management Svcs. PO Box 514707 Los Angeles, CA 90051	12674 Preacher Powell Rd. Carriere, MS 39426 Pearl River County	2022	\$125,000.00

Property was repossessed.  
 Property was foreclosed.  
 Property was garnished.  
 Property was attached, seized or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No  
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No  
 Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- No  
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- No  
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- No  
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		

#### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- No  
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Schneider & Stone 8424 Skokie Blvd. Suite 200 Skokie, IL 60077 <a href="mailto:ben@windycitylawgroup.com">ben@windycitylawgroup.com</a> Debtor's boyfriend	Attorney Fees	7/22/2022	\$5,000.00

Schneider & Stone 8424 Skokie Blvd. Suite 200 Skokie, IL 60077 <a href="mailto:ben@windycitylawgroup.com">ben@windycitylawgroup.com</a>	Attorney Fees	7/22/2022	\$1,717.00
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17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- No  
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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- 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- No  
 Yes. Fill in the details.

<b>Person Who Received Transfer</b> Address	<b>Description and value of property transferred</b>	<b>Describe any property or payments received or debts paid in exchange</b>	<b>Date transfer was made</b>
Person's relationship to you			

- 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

- No  
 Yes. Fill in the details.

<b>Name of trust</b>	<b>Description and value of the property transferred</b>	<b>Date Transfer was made</b>
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**Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

- 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- No  
 Yes. Fill in the details.

<b>Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)</b>	<b>Last 4 digits of account number</b>	<b>Type of account or instrument</b>	<b>Date account was closed, sold, moved, or transferred</b>	<b>Last balance before closing or transfer</b>
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- 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

- No  
 Yes. Fill in the details.

<b>Name of Financial Institution</b> Address (Number, Street, City, State and ZIP Code)	<b>Who else had access to it?</b> Address (Number, Street, City, State and ZIP Code)	<b>Describe the contents</b>	<b>Do you still have it?</b>
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- 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- No  
 Yes. Fill in the details.

<b>Name of Storage Facility</b> Address (Number, Street, City, State and ZIP Code)	<b>Who else has or had access to it?</b> Address (Number, Street, City, State and ZIP Code)	<b>Describe the contents</b>	<b>Do you still have it?</b>
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**Part 9: Identify Property You Hold or Control for Someone Else**

- 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- No  
 Yes. Fill in the details.

<b>Owner's Name</b> Address (Number, Street, City, State and ZIP Code)	<b>Where is the property?</b> (Number, Street, City, State and ZIP Code)	<b>Describe the property</b>	<b>Value</b>
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**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

**toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.**

- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No
- Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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25. Have you notified any governmental unit of any release of hazardous material?

- No
- Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
- Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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#### **Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12.
- Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
Gaiamed Dental, Inc. 1535 Lake Cook Rd. Suite 108 Northbrook, IL 60062	Dental Office	Dates business existed EIN: From-To 2013-Present

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

Name  
Address  
(Number, Street, City, State and ZIP Code)

Date Issued

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Andromeda T. Pearson

Andromeda T. Pearson  
Signature of Debtor 1

Signature of Debtor 2

Date August 4, 2022

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Andromeda T. Pearson**

Case No. **22-08206**  
Chapter **13**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <b>4,500.00</b>
Prior to the filing of this statement I have received .....	\$ <b>4,500.00</b>
Balance Due .....	\$ <b>0.00</b>

2. \$ **313.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify): **Debtor's boyfriend**

4. The source of compensation to be paid to me is:

Debtor       Other (specify):

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

**All services described in the Court Approved Retention Agreement for the Northern District of Illinois.**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 4, 2022

Date

/s/ Ben Schneider

**Ben Schneider**

*Signature of Attorney*

**Schneider & Stone**

**8424 Skokie Blvd.**

**Suite 200**

**Skokie, IL 60077**

**847-933-0300 Fax: 312-509-4937**

**[ben@windycitylawgroup.com](mailto:ben@windycitylawgroup.com)**

*Name of law firm*